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EPIDEMIOLOGY

No. 236

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CONTENTS

HUMAN DISEASES

INTER-AMERICAN AFFAIRS

- CARICOM Seeks Area Action Against Cholera, Other Diseases
(ADVOCATE-NEWS, 9 Jun 81)..... 1

AUSTRALIA

- Carcinogenous Chemicals at Unsafe Levels in South Australia's Water
(Peter Blunden; THE AUSTRALIAN, 10 Jun 81)..... 2

Briefs

- Infectious Organism 4
Gastroenteritis Killer 4
Immunization Call 4
Sewage Plan Criticism 5
TB Increase 5

CUBA

Briefs

- Dengue Control Measures Issued 6
Anti-Mosquito Drive 6

FRANCE

Briefs

- Viral Hepatitis-B Vaccine 7

GHANA

Briefs

Possible Malaria-Related Disease 8

INDIA

High Incidence of Acute Diarrhea in Children Noted
(THE STATESMAN, 26 May 81)..... 9

Briefs

Cholera Deaths Reported 10
Uttar Pradesh Malaria 10
Conjunctivitis in Bombay 10
Jaundice Deaths Reported 11
Malaria in Calcutta 11
Conjunctivitis in Orissa 11

INDONESIA

Briefs

Five Cholera Deaths 12
Cholera Kills 20 12
20 Mystery Deaths 12

JAMAICA

Mosquito Eradication Drive Begun To Avert Malaria
(THE DAILY GLEANER, 4 Jun 81)..... 13

MACAO

Junks Bring Epidemic Fear
(Sarah Monks; SOUTH CHINA MORNING POST, 30 May 81)..... 14

MALAYSIA

Briefs

Dengue Fever Outbreak 15

MOZAMBIQUE

Briefs

Cholera Deaths 16

NEPAL

Incidence of Malaria Cases Detected Drops
(THE RISING NEPAL, 28 May 81)..... 17

PAKISTAN

Malnutrition Major Cause of Child Diseases (THE MUSLIM, 7 Jun 81).....	18
Afghan Refugee Children Diseased (Sikander Hayat; THE MUSLIM, 17 May 81).....	19
Conjunctivitis Assumes Epidemic Form (DAWN, 14 Jun 81).....	20
Eye Disease Spreading Fast in City (DAWN, 16 Jun 81).....	22
Polio-Vaccine Processing Laboratory Opened (Editorial; DAWN, 7 Jun 81).....	24
Briefs Eye Disease Epidemic	25

PORTUGAL

Briefs Pneumonia Epidemic	26
------------------------------	----

SRI LANKA

Briefs More Cholera Cases	27
------------------------------	----

SUDAN

Briefs Insecticide To Combat Malaria	28
Decline in Meningitis Cases	28

TAIWAN

Briefs Poliomyelitis Disappearing	29
--------------------------------------	----

UNITED KINGDOM

Briefs Redlight on Yellow Fever	30
------------------------------------	----

ZAMBIA

Measles Deaths in Kawambwa (DAILY MAIL, 17 Jun 81).....	31
--	----

ANIMAL DISEASES

WORLDWIDE AFFAIRS

- Rabies From Soviet Union Causes Concern in Finland
(Riitta Anttikoski; HELSINGIN SANOMAT, 31 May 81)..... 32

VIETNAM

- Livestock in Ho Chi Minh City Area Inoculated
(SAIGON GIAI PHONG, 4 Mar 81)..... 37

PLANT DISEASES AND INSECT PESTS

THAILAND

- Plant Diseases Diagnosed by Special Teams
(THE RISING NEPAL, 28 May 81)..... 38

INTER-AMERICAN AFFAIRS

CARICOM SEEKS AREA ACTION AGAINST CHOLERA, OTHER DISEASES

Bridgetown ADVOCATE-NEWS in English 9 Jun 81 p 6

[Text] The Caribbean Community (CARICOM) has called for urgent action to keep the 12-nation bloc free of cholera.

In a message marking World Environment Day, head of the CARICOM health desk, Dr Philip Boyd, warned "...the factors that now spread gastroenteritis and typhoid in some countries are the same factors that will spread cholera if we do not act soon."

The health expert listed the most important health hazards in the region as those arising from pollution of drinking water.

"Water-borne organisms are one of the chief causes of sickness and death," he noted. "They are the cause of the diarrhoeal disease that accounts for many deaths in children under five years of age and indeed deaths at all ages. They are the cause of dysentery, typhoid and cholera."

The community reaffirmed its commitment to the creation of a safe environment as an essential part of the strategy for human development.

The community has prepared a work programme to deal with diseases not only water-borne but carried by insects and rodents, Dr Boyd said.

Among the principal objectives of this programme are that every Caribbean family should have sufficient water, safe for drinking, inside the house 24 hours per day, as well as any approved system of disposal of excreta and liquid waste.

Chief features include a firm policy statement by each member government, the setting up of a regional environmental health institute in St Lucia, and a regional training programme.

Dr Boyd said: "Such a programme is of far-reaching significance for human wellbeing and human development in the area, because these issues bear upon the safety and productivity of a large proportion of our population and the survival of many of our children, because the problems are preventable at reasonable cost, and because the action programme includes measures that have practical meaning in the everyday life of the poor and undeserved." (CANA)

CARCINOGENOUS CHEMICALS AT UNSAFE LEVELS IN SOUTH AUSTRALIA'S WATER

Canberra THE AUSTRALIAN in English 10 Jun 81 p 1

[Article by Peter Blunden]

[Text] Cancer-causing chemicals have been detected in South Australia's water supply at almost seven times the level regarded as safe, a senior Labor MP claimed yesterday.

The State Opposition spokesman on health, Dr John Cornwall, said Government penny-pinching was thwarting effective measures to combat the contamination.

He said the carcinogen, trihalomethanes, existed at levels up to 688 parts per millions, compared with the recommended safe level of 100 parts per million set by the US Environment and Protection Board.

The South Australian Government has ordered an intensive study into the chemicals which will be carried out by the Engineering and Water Supply Department, through the State Water Laboratories at Bolivar, north of Adelaide.

But, he said, this would not provide a solution.

Dr Cornwall claimed the laboratory was not equipped to conduct biological tests. It could only carry out chemical analysis.

Cutbacks

And an Engineering and Water Supply Department spokesman said yesterday the chemical study would take until the end of next year to reach any conclusions.

"The State Government is laying a time bomb," Dr Cornwall said.

"It's time the people of this state were informed that these chemicals do exist, and that the Government acknowledged the dangers.

He said tests in the US had shown that a high, long-term intake of the chemical caused a dramatic increase in the incidence of some cancer forms, in particular bowel and bladder cancers.

He said South Australia was the worst place in the world, outside some parts of the US, for the high incidence of the carcinogen.

He said plans to filter the chemicals from the State's water supply had been shelved to save money.

A special filtration scheme had been proposed six months ago but was deferred because of Government cutbacks.

The Minister for Water Resources Minister, Mr Arnold, said the Government had been assured by the State Health Commission that there was no threat to the health of people caused by the high levels of trihalomethanes.

CSO: 5400

BRIEFS

INFECTIOUS ORGANISM--The neurosurgical ward at Royal Perth Hospital has been closed after the discovery of an infectious organism among the patients. About 12 patients in the 21-bed ward have been isolated to prevent the infection from spreading throughout the hospital. The organism, called klebsiella, was discovered during routine tests on patients about a week ago but this particular strain is resistant to normal antibiotics. After early attempts to stop the infection had failed, ward 31 was isolated and further tests carried out. A spokesman for the medical administrator of RPH said that the organism had been introduced by a patient. All precautions had been taken. The organism had been isolated and tests were being carried out to determine the antibiotic treatment that would kill it. Several antibiotics were available. It was a matter of choosing the right one. A similar outbreak had occurred at RPH previously and had responded to antibiotics. [Text] [Perth THE WEST AUSTRALIAN in English 25 May 81 p 3]

GASTROENTERITIS KILLER--Health investigators are trying to isolate a mysterious infection that has killed two people in a psychiatric hospital at Goulburn in south-eastern NSW. It was revealed yesterday that 63 people had contracted the illness, a form of gastroenteritis, at the Kenmore Psychiatric Hospital last month. Two patients, aged 79 and 83, died swiftly and in agony at the government run hospital on May 12. Sixty patients--mostly elderly--and a staff member suffered severe food-poisoning symptoms over four days. Contaminated food is believed to be responsible for the illness, but extensive laboratory tests and a coroner's examination have been unable to isolate the organism that caused the illness. The Regional Health Office at Goulburn has been checking food prepared outside the hospital to ensure there is no recurrence of the illness. The Regional Director of Health, Mr John Bissett, and the Goulburn coroner have ruled out the handling of the food as the cause of the deaths. Tests have narrowed the origin of the organism down to contaminated meat, possibly frankfurters or chicken, but Mr Bissett said it was impossible to be sure of the source of the infection until the organism had been identified. It is the second large-scale food-poisoning incident in Australia this year. [By David Hancock and Sue Cook] [Text] [Canberra THE AUSTRALIAN in English 2 Jun 81 p 2]

IMMUNIZATION CALL--Canberra--A recent warning from medical specialists is likely to lead to increased State government programmes of immunising children against infectious diseases. The National Health and Medical Research Council warned that outbreaks of serious infectious diseases such as Diphtheria, smallpox and

pulse were "inevitable" unless immunisation continued. "The level of immunity has fallen to an unacceptably low level for some diseases," the council found in its recent meeting in Brisbane. The level must be raised if a resurgence of the diseases was to be prevented, the council said. The council called for injections against mumps to be administered to infants aged 12 months, diphtheria-tetanus "booster" injections for 15-year-olds, and education programmes in schools to warn girls of the dangers of rubella (German measles) for unborn children. The council rejected criticism of the whooping cough vaccine, which has led to a decline in the number of vaccinations. Infants should still get the "triple vaccine"--against diphtheria, tetanus and whooping cough--as serious side effects were extremely rare and far outweighed by the dangers of contracting the cough, the council said. The council's statements are advisory only, but State Governments, which are represented on the council, usually implement its opinions. [By Stephen Mills] [Excerpts] [Melbourne THE AGE in English 8 Jun 81 p 4]

SEWAGE PLAN CRITICISM--The State Government's decision to begin exploratory drilling for submarine sewage outlets without allowing for secondary treatment of the sewage could be disastrous, according to an Opposition MP. Mrs Rosemary Foot (Lib, Vaucluse), said the Government was spending \$100 million on new outlets at Bondi, North Head and Malabar. Drilling for the projects has begun. The scheme depended on ocean and wind currents and industrial harmony in the Water Board for its success, Mrs Foot said. None of these could be relied upon. Schemes, such as the Government's to pour primarily treated sewage into the sea had been rejected overseas in favour of secondary treatment processes. [Text] [Sydney THE SYDNEY MORNING HERALD in English 8 Jun 81 p 9]

TB INCREASE--Brisbane--The Queensland Government may reintroduce compulsory community x-rays to detect tuberculosis because of a sharp increase in the disease. The State Health Minister, Mr Austin said he was so worried about TB's making a comeback in Queensland that he had ordered close monitoring of the disease. One of the main causes for the increase was the influx of people from overseas arriving in Queensland with the disease. [Text] [Perth THE WEST AUSTRALIAN in English 8 Jun 81 p 3]

CSO: 5400

BRIEFS

DENGUE CONTROL MEASURES ISSUED--In connection with the press note released a few days ago by the MINSAP [Ministry of Public Health] telling the citizenry of a virus circulating in the country, it has been learned that the investigations carried out by the institute in charge have confirmed the diagnosis of dengue. This time it is a virus variety different from that of the 1977-78 epidemic, although the treatment and control measures are similar. Therefore, special emphasis must be placed on the control measures ordered by the MINSAP in the fight against the aedes aegypti mosquito that transmits the disease. [Text] [FL182349 Havana Domestic Service in Spanish 2300 GMT 18 Jun 81]

ANTI-MOSQUITO DRIVE--Luis Alvarez de La Nuez, member of the Communist Party of Cuba Central Committee and first party secretary in Havana Province, has said that the immediate implementation of the campaign against the aedes aegypti mosquito is a priority task in the province. Municipal secretaries, people's government assembly presidents and public health directors, as well as leaders of mass organizations and administrative organs in Havana Province, attended a meeting at which Alvarez de La Nuez urged them to undertake the task without delay. [Havana Domestic Service in Spanish 2130 GMT 15 Jun 81]

CSO: 5400/2145

BRIEFS

VIRAL HEPATITIS-B VACCINE--The Pasteur Production Institute (IPP) has just announced that it has received authorization to put the viral hepatitis-B vaccine on the market (APM). The product should be available by 9 June. However, the APM notes that the vaccine will initially be reserved for communities. Only personnel and patients at the hemodialysis center (artificial kidney) and those employed at the blood transfusion centers may receive the vaccine. The IPP announced that in the second phase, the vaccine will be available to all French hospital personnel. Next year, the vaccine could be marketed by pharmacies and abroad by the different subsidiaries of SANOPI [expansion unknown], of which the IPP is an affiliate, thanks to great development of production. Moreover, it is emphasized that this scheduling results from the decision of the French Ministry of Health, which wants to make certain that the product is totally safe. Contacts are now being made by the IPP and health officials in Senegal in connection with the possibility of setting up a vaccine manufacturing plant in Dakar, responding to the wishes of Prof Philippe Maupas, the father of the vaccine (Virology Institute until his death). Vaccination requires three injections 1 month apart, followed by a booster shot the following year. The cost of one dose has been set at 85 francs, which obviously prohibits sale in Third World countries where the illness is endemic. In those countries, it is suspected of being linked to early cancer of the liver. The Virology Institute in Tours is continuing its vaccination campaign in Senegal (LE MONDE, 8 May 1980). [Text] [Paris LE MONDE in French 4 Jun 81 p 48] 11,464

CSO: 3400/2140

BRIEFS

POSSIBLE MALARIA-RELATED DISEASE--An outbreak of a strange disease which makes patients misbehave and laugh unceasingly, has been reported at the Boa Amponsem Secondary School at Dunkwa-on-Offin. According to Dr Yaw Ntin, Senior Medical Officer in charge of the Dunkwa Government Hospital, 20 students--15 girls and five boys--from the school have been admitted. He attributed the cause of the disease to extra stress on the brain but advised the school authorities to take precautionary measures against malaria. He said a similar disease broke-out in the school last year.--GNA. [Text] [Accra GHANAIAN TIMES in English 25 May 81 p 5]

CSO: 5400/5186

HIGH INCIDENCE OF ACUTE DIARRHEA IN CHILDREN NOTED

Calcutta THE STATESMAN in English 26 May 81 p 7

[Text]

By a Staff Reporter

IN India 15 million children die every year of acute diarrhoeal diseases. The world infant mortality rate of this disease is between four and five million a year, according to Dr V. Ramalingaswami, Director-General, Indian Council of Medical Research.

Dr Ramalingaswami was inaugurating a W.H.O. inter-regional course for managers for control of national diarrhoeal diseases programme at the National Institute of Cholera and Enteric Diseases, Calcutta, on Monday.

He said that the incidence of the diarrhoeal diseases was highest between three months and three years. It was estimated that about a third of the beds in children's hospitals in the developing countries was occupied by acute diarrhoeal cases. It was also found that poor children with insufficient sanitation facilities suffered more frequently from diarrhoea. He termed the ailment as "a disease of the under-privileged."

Dr Ramalingaswami said that since the diseases were caused by such factors as malnutrition, overcrowding, lack of potable water supply and filthiness, it was necessary to fight the menace on multiple fronts. He felt provision for safe drinking water was not enough if it was not backed by proper waste disposal, education on personal hygiene and on food habits.

The importance of breast feeding was also stressed by Dr Ramalingaswami in the control of diarrhoeal diseases. He said there was a number of immunological factors in human milk. "What is also interesting is that the amount of nutrients in human milk is not reduced even when the mothers are

moderately undernourished," he observed.

The ICMR chief said that glucose-saline mixture given orally to a patient suffering from acute diarrhoea made his chances of survival better. It had taken about 150 years to discover that oral rehydration was an effective therapeutic measure that could prevent "progression of mild and moderate diarrhoea to severe diarrhoea." What was now necessary was that glucose salt mixture should be available throughout the year and in every home, when required.

Dr S. C. Pal, director, National Institute of Cholera and Enteric Diseases, said that the W.H.O. initiated diarrhoeal diseases control programme at the global level in 1975. The programme had since been expanded and about 80 countries in Asia, Africa and Latin America "have initiated action in the matter."

INDIA

BRIEFS

CHOLERA DEATHS REPORTED--Bhuj, June 1 (UNI)--Cholera, jaundice and malaria have gripped the border district of Kutch following a severe heat-wave in the region. According to official sources, the death toll due to Cholera in Mandvi Taluka has risen to 10 with five more deaths reported of the district. About 1,000 cases of Cholera have been reported in the Taluka and more than 10,000 people had been inoculated. The Health Department had also obtained 30,000 ampules of the anti-cholera vaccines to combat the epidemic. About 150 cases of jaundice had also been reported in Nakhtrana Taluka and Bhun Taluka. The Kutch district magistrate had declared the district as Cholera and Malaria affected. [Text] [New Delhi PATRIOT in English 2 Jun 81 p 7]

UTTAR PRADESH MALARIA--Incidence of malaria cases in Uttar Pradesh has shown a marginal decline of 4.63 per cent in 1980 as compared to the previous year, reports UNI. Official sources in the State Health Ministry said that in 1980 little more than 142,000 cases of malaria were detected as against about 150,000 cases in 1979. The State Government has brought Lucknow, Allahbad, Meerut, Jhansi, Agra, Kanpur, Varanasi, Ghaziabad, Aligarh Mathura, Moradabad and Badaun under a malarial scheme covering a population of 5.18 million. During 1981-82 the Government had allotted 27.5 million tablets of aminoquinoline and 0.51 million tablets of 8-aminoquinoline. Allotment of daraprim, paracetamol could not be made available as the State Government had not submitted the stocks and requirement statement to the Union Health Ministry. The sources said independent appraisal of National Malaria Eradication Programme teams had suggested that the essential medicines required for the treatment of cerebral malaria be provided to the primary health centres, specially those where the cases of 'P. Falciparum' had been reported. The appraisal teams had stated that 'P. Falciparum' infection had now spread to ten districts in Agra Badaun-Moradabad-Bareilly belt. It suggested that spraying be done on priority as compared to non-Falciparum areas. [Text] [New Delhi PATRIOT in English 26 May 81 p 8]

CONJUNCTIVITIS IN BOMBAY--Bombay, May 29--The number of conjunctivitis cases registered in municipal dispensaries since the beginning of the current month is 13,498, the municipal commissioner, Mr. D. M. Sukhtankar, told newsmen here today. Wards B, C, D, E, F (north), G (south), M and S have been affected noticeably by the virus infection, which appears to visit citizens in Bombay more often in recent years. The abatement of the eye affliction may take place when the rains come. It is usually wiped away by the rains, according to the commissioner. [Text] [Bombay THE TIMES OF INDIA in English 30 May 81 p 6]

JAUNDICE DEATHS REPORTED--Bhiwani, May 29 (PTI)--Jaundice is reported to have claimed two lives in village Tepala in Loharu sub-division, according to reports received here. The health authorities have deputed a senior doctor to render medical help as also to check its further spread in epidemic form. Meanwhile, the district magistrate has prohibited sale of all unhygienic eatables in the district. [Text] [New Delhi PATRIOT in English 30 May 81 p 5]

MALARIA IN CALCUTTA--Trenches dug by Metro Railway and the Calcutta Metropolitan Development Authority spread all over the city and often filled with stagnant water are worrying health officials of Calcutta Corporation since they are breeding grounds for mosquitoes, particularly after the rains. A spokesman of the Corporation said in Calcutta on Monday that reports during the past few months indicated that the incidence of malaria in the city was on the rise. He said that in 1979 there were about 2,700 and in 1980 about 3,000 reported malarial cases in the city. He, however, felt that in fact, more people had been victims of this disease as private practitioners generally did not care to report to the district health offices. Replying to a question the health officials said: "We have written a number of times to these authorities and requested them to organize their own teams to take precautionary measures against the breeding of mosquitoes." The Corporation officials said that they had no authority to enter the area where either CMDA or the Metro Railway's projects were under way. Health Department sources said that there were about 2,000 tanks and ponds in the city. The Corporation was taking necessary measures in areas favourable for mosquito breeding. [Text] [Calcutta THE STATESMAN in English 26 May 81 p 14]

CONJUNCTIVITIS IN ORISSA--Cuttack, May 25--The entire coastal Orissa is in the grip of conjunctivitis, reports UNI. According to Professor Kulamani Mishra of the Eye Department of the local S.C.B. Medical College and Hospital, on an average more than 100 patients are coming to the hospital for treatment. He said that no special arrangement could yet be made to tackle the rush of patients other than providing them with only eye-drops and bandages. Earlier reports of large-scale incidence of the disease came from Puri, Bhubaneswar and other coastal areas of Orissa. [Text] [Calcutta THE STATESMAN in English 26 May 81 p 7]

CSO: 5400

BRIEFS

FIVE CHOLERA DEATHS--Jakarta, May 27 (AP)--Five persons have died and 54 others have been hospitalized after an outbreak of cholera in several West Sumatra villages in the past few weeks, a provincial official said Wednesday. Djaendar, head of the Aguin Regency Social Affairs Office, said that unsanitary living conditions and drinking water were believed to have caused the disease to spread. Authorities have provided medical assistance and guidance to help the people learn to live in a cleaner environment, he said. [Taipei THE CHINA POST in English 28 May 81 p 6]

CHOLERA KILLS 20--Jakarata, May 25 (AP)--Twenty persons died of cholera in a Moluccan district of Tanimbar last week, the ANTARA NEWS AGENCY said Monday. The disease has brought the total of 85 persons dead this month in that area from cholera, ANTARA said. A medical team assisted by several Australian doctors has been flown to the stricken area from the city of Ambon to provide medicine and other medical aid, the agency said. [Text] [Taipei THE CHINA POST in English 27 May 81 p 3]

20 MYSTERY DEATHS--Jakarta, May 25 (AP)--Twenty persons have died after contracting an unidentified disease in Sihulambu village, some 100 kilometers (60 miles) north of the South Tapanuli Regency capital of Padang Sidempuan, the ANTARA NEWS AGENCY said Monday. The deaths over the past three weeks may have been caused by various epidemics, Dr Kodri S. Siregar, the regency health service chief, was quoted as saying. [Text] [Taipei THE CHINA POST in English 26 May 81 p 6]

CSO: 5400

MOSQUITO ERADICATION DRIVE BEGUN TO AVERT MALARIA

Kingston THE DAILY GLEANER in English 4 Ju 1 p 14

[Text] A mosquito eradication programme is being undertaken by the Ministry of Health to avert an outbreak of malaria. There have been three suspected cases in the Corporate Area, but the Ministry of Health has confirmed only one. It is believed that the victims who are now in quarantine may have picked up the disease in Haiti. The Ministry in collaboration with the Public Health Department of the Kingston and St Andrew Corporation has launched the programme aimed specifically at wiping out the anopheles albemanus mosquito, carriers of the disease.

The cases were discovered over the week-end and on Monday an emergency meeting was held between Ministry and Public Health Department personnel to discuss the matter. Since then spraying and house-to-house surveys have been taking place in the Hagley Park Road area. The Molyne Road and Waterhouse areas will also be sprayed. The three cases are from these areas. The programme will eventually involve all of the Corporate Area.

The survey involves checking for possible breeding places and doing blood smears on the residents in the areas identified to test for the fever. Spraying will be done every night and early morning, times when the mosquitoes are frequent, a spokesman for the Public Health Department said.

This is a re-infestation as the disease was eradicated in Jamaica some years ago. According to a Ministry of Health spokesman intensive eradication measures have been undertaken and the Ministry is moving quickly to stem any outbreak.

CSO: 5400

JUNKS BRING EPIDEMIC FEAR

Hong Kong SOUTH CHINA MORNING POST in English 30 May 81 p 7

[Article by Sarah Monks]

[Text] The presence of about 2,200 Vietnamese boat people living on their junks off Macau's Taipa Island has caused fears that an epidemic could spread through the Portuguese territory.

Moreover, it is estimated by some sources that only five per cent of the recent arrivals are genuine refugees.

The sources said yesterday that the rest are thought to have entered Macau illegally, having been resettled in China since 1978 and 1979.

Macau health authorities are giving anti-cholera inoculations to prevent a possible outbreak of disease. A similar inoculation campaign is expected to be extended to refugees in two camps on Coloane Island and in Macau.

Sources said there was no immediate danger of an epidemic. However, conditions on the 40 or so boats off Taipa were described as those of "tragic discomfort."

The Macau Government and local church organisations are giving the boat people three meals a day. This is while they are being screened by Macau authorities to establish their status as genuine refugees or illegal immigrants. If they are found to be genuine asylum seekers from Vietnam they will come under the care of the United Nations High Commissioner for Refugees in Macau and be moved ashore to UNHCR transit camps which currently hold about 1,600 refugees.

The UNHCR would also reimburse the Macau Government for the money it has spent on these people while determining their status.

If the boat people are designated illegal immigrants they will be repatriated to China. One source expressed full confidence that China was aware of the implications should it decide not to accept the return of illegal immigrants from the group of recent arrivals in Macau.

"I'm sure the Chinese authorities have no desire to destabilise the international resettlement programme," the source said. "There is no indication that they are not playing ball."

CSO: 5400

MALAYSIA

BRIEFS

DENGUE FEVER OUTBREAK--Kuala Lumpur, Malaysia, May 27 (UPI)--There has been an outbreak of dengue fever and "foot and mouth" disease in Kuala Lumpur, authorities said Wednesday. The Health Department reported 60 suspected cases of dengue fever in Selangor State this month. The mosquito-borne disease has killed a five-year-old girl. In a government abattoir, all 650 head of cattle have contracted "foot and mouth" disease of which about 450 cows have died, prompting the authorities to ban interstate cattle transport until further notice. [Text] [Taipei THE CHINA POST in English 28 May 81 p 6]

CSO: 5400

BRIEFS

CHOLERA DEATHS--Beira--Since the beginning of the cholera outbreak in this city, 55 deaths have already occurred in the period between January and May of this year as a result of this disease. During this same period, 350 cases of cholera were confirmed out of 640 suspected cases. Within the last 15 days, health services in this city have confirmed 7 cases of cholera from among 8 suspected ones. "Cholera cases have been detected recently in the Munhava area, where sanitary conditions are quite precarious," Dr Clementina Antonio, health officer for the city of Beira stated. The last cholera death registered in Beira was on 20 May, following an 11-day period when no fatalities were registered. [Text] [Maputo NOTICIAS in Portuguese 11 Jun 81 p 3]

CSO: 5400/5191

INCIDENCE OF MALARIA CASES DETECTED DROPS

Kathmandu THE RISING NEPAL in English 28 May 81 p 1

[Text] Nepalgunj, May 27: The number of malarial patients in seven of the districts of Far Western Nepal has dropped to 720 in the first eight months of the current fiscal year, reports RSS.

The number of malarial patients in the fiscal year 1979-80 in those districts was 992.

According to Far Western Nepal Eradication Regional Office, blood test of 97,766 people suspected to have contacted malaria was taken in the first eight months of the current fiscal year.

Of the malarial patients detected through blood test there 180 patients are in Kanchanpur district, 144 in Kailali district, 111 in Dang district, 106 in Banke district, 104 in Baitadi district and 17 in Bardiya district.

Insecticides were being sprayed in hyper endemic areas in order to stop the spread of malaria in the region, the office source said. [as published]

Insecticides are being sprayed from Dang to Kanchanpur district inhabited by 366,215 people to control malaria.

Under the malaria eradication programme re-test of ten per cent of the negative blood and ten per cent of positive blood is to be conducted. Besides, laboratory test, study of the effect of the insecticides will also be done in order to ascertain how far insecticides have been effective.

Meanwhile, it is also planned to conduct entomological study to ascertain whether mosquitoes have changed their nature and need different kinds of insecticides.

Malarial eradication work in the meanwhile is going on in Dang, Banke, Bardiya, Kailali, Kanchanpur and Baitadi districts under the regional bureau of the Malaria Eradication Organisation.

Darchula district office of the bureau and two units of Dadeldhura have been extending service in eradicating malaria in Baitadi district while Surkhet unit of the bureau has been covering some parts of Salyan, Dailekh and Jajarkot and that of the Dang district has been extending its service to Salyan, Pyuthan, Arghakhachi and some other parts.

Thus the regional bureau is extending its service to over 12 hundred thousand people of the region.

CSO: 5400

MALNUTRITION MAJOR CAUSE OF CHILD DISEASES

Islamabad THE MUSLIM in English 7 Jun 81 p 6

[Text]

FAISALABAD, June 6: As many as 3.37 lakh children in Pakistan get afflicted with diseases like polio, diphtheria and whooping cough every year and become incapacitated for life.

This was revealed to The Muslim by Project Director, EPI, Punjab, Dr. Ghulam Sarwar Mirza. Considering the high rate of infant mortality in Pakistan the government had launched a massive campaign against these diseases. Focusing the cause of excessive incidence of these diseases he listed malnutrition of mother and child and unhygienic living conditions as factors.

According to official statistics the number of infants and children below school-going age who were incapacitated in Pakistan every year by diseases like TB polio, diphtheria whooping cough, measles and rickets was 3.37 lakh. The number did not include fatalities.

While talking of official measures to combat the menace he said that eradication measures were being taken up by government since 1979 in right earnest.

Among these measures was the establishment of 129 EPI centres in the principal cities of Pakistan. Of these, 120 were expected to start functioning by the end of the current financial year. The project, he said, had been launched in collaboration with local municipal corporations, municipal committees and town committees. Initial cost on each centre would be Rs. 15,000 while with a watching subsidy coming from government to provide medicines free of cost.

Emoluments of a five-member staff per unit, including one lady official, would be funded by UNICEF.

GAS POWER HOUSE: Maintenance machinery for the 200-megawatt gas turbine power house in Faisalabad valuing Rs. 2.526 million arrived and installation work will begin within this month.

The machinery has been imported from Netherlands at a cost of over Rs. 1.70 million. Total cost of the project including building and installation charges would come to Rs. 4 million. The main object of procuring the machinery is to expeditiously attend to the repair and maintenance of gas turbines operative in Quetta, Kotri, Juddu, Multan, Faisalabad and Shahdara. Installation of the new workshop in Faisalabad would not only increase the efficiency of these power stations but help in saving millions of rupees in foreign exchange.

PROBE URGED: Eminent citizens from the social, religious and educational circles of Faisalabad have demanded from the Press and authorities that the circumstances culminating in the premature and tragic death of Zareen Fatima, a young lady officer of WASA, and Anjum Ata, a girl student of National College of Arts, Lahore, may be unearthed.

Prof. Munir Abbas Shah Hashmi, a scholar and Shia leader, expressed grave concern and indignation over the lethargy of the police in failing to register fresh case about the mysterious death of Zareen Fatima who allegedly drowned in an almost dry pond near Khurrianwala. Protection of the life and honour of working women and girl students was the foremost duty of the local administration as envisaged by the President, he added.

AFGHAN REFUGEE CHILDREN DISEASED

Islamabad THE MUSLIM in English 17 May 81 p 1

[Article by Sikander Hayat: "Children Refugees Facing Worst of It"]

[Text]

ISLAMABAD, May 16: About 40 per cent of the Afghan refugee children are suffering from active trachoma, 26 per cent are infected with tuberculosis and less than 9,000 out of the 850,000 children living in the tented villages go to school.

These grim figures, collected on the basis of sample survey, are part of the United Nations High Commissioner for Refugees (UNHCR) 1980 Review report which covers the Afghan refugees, now exceeding the two-million mark, who have crossed over to Pakistan.

The report said a survey undertaken by a World Health Organisation expert in a sample of Afghan refugee children in the NWFP and Baluchistan revealed that 40 per cent of them were suffering from active trachoma and 1.4 per cent from xerophthalmia.

A similar survey to find the degree of TB incidence among the refugee children carried out in December 1980 revealed that 26 per cent of them between the ages of five and nine years were found to be infected as compared with 12 per cent of the same age group among the local population.

The report said the high incidence of TB infection rate indicates a high prevalence of open TB amongst the adults in the refugee villages.

The report said the health status of the Afghan refugees did not differ significantly from that of the rural population of

Afghanistan.

One exception to this is the high incidence of malaria which may be due to the fact that many of them come from cooler, high-lying areas of their country, and have not developed immunity to this disease.

The mortality rate, monitored by the Malikis of the refugees, according to a reliable source, however, has lowered.

A recent report from an area across the border from which a large chunk of refugees have come to Pakistan said infant mortality in certain Afghanistan areas was above 80 per cent.

The UNHCR has reportedly started a number of programmes to help ease the situation, the major thrust of which being the overcoming of malnutrition.

A programme to provide supplementary feeding to the reported cases of marasmic children and to those weakened by illness has recently been started in Peshawar and Kohat areas. Besides special vaccination, the sick children are being given milk and protein biscuits.

The report, quoting the Pakistan Government reports, said in the 50 schools set up in the NWFP and 29 in Baluchistan in all about 8,750 refugee children were enrolled.

The schools set up so far are for boys, because "it is general consensus among the refugee elders and the parents that girls do not require education", said the report.

CONJUNCTIVITIS ASSUMES EPIDEMIC FORM

Karachi DAWN in English 14 Jun 81 pp 1, 12

[Text] "Viral Conjunctivitis" has struck Karachi in an epidemic form eye specialists said here yesterday.

Leading ophthalmologists told DAWN that the Health authorities should immediately declare it as an "epidemic" and take effective measures to combat it on an "emergency basis."

Dr M. H. Rizvi, chief of the Spencer's Eye Hospital, said the disease begins with an irritation in the eye which soon turns blood-red and becomes very painful.

He disclosed that over 200 cases were registered only yesterday in his hospital. He felt that the possible cause of this infection could be "air pollution." He did not agree with the view that contamination water from Haleji Lake could have been the source of this disease.

Dr Rizvi said special care should be taken to keep the eyes clean. He also suggested that Supha Cetamide (20 per cent) drop could be used as a preventive besides Cholomicities ointment for the healthy eye if there are cases of infection in the neighbourhood. There is no specific treatment for the disease and it is cured in a week's time.

Dr Jawaid Alam Khan, another eye specialist and Medical Superintendent of the Abbasi Shaheed Hospital, said that this disease has struck the city for the third time since its first invasion in 1968.

He felt that water and air pollution could have been responsible for this infection. He advised the suffering people to remain indoors wear dark glasses and take rest. As there is no treatment for this disease, he said symptomatic and anti-inflammatory treatment could be under taken.

He also said that the belongings of the suffering patients should be kept separate from healthy people.

Dr Jawaid Alam said that the Health Authorities, after declaring it an "epidemic" must try to ascertain its causes and conduct lab tests. He said since highly sophisticated pathological tests are required, they are possible only at the Jinnah Post Graduate Medical Centre.

He also appealed to his fellow physicians not to charge for the treatment of this disease. He also said that the worst-affected people are those belonging to the poor, lower middle and middle class."

He said he was also attending for some well to do patients also in his clinic but their number was very small in comparison with the rush at public and Government hospitals.

Civil Hospital doctors when contacted said that they have been receiving patients suffering from the disease and their number has been increasing every day.

Dr B. A. Gureshi, Director, Jinnah Post-Graduate Medical Centre (JPMC) denied that there was an "epidemic." He however admitted that there was need for investigation in the matter. He also said that the investigation was "in process" and added "if need be, assistance will be taken from the National Institute of Health, Islamabad to find out the causes of this highly contagious disease of the eye.

He said only "palliative treatment could be given to the patients."

Meanwhile the Spencers Eye Hospital and the Abbasi Shaheed Hospital have put its staff on the 'alert' and special measures like procurement of additional medicine have been taken.

In some mosques of Liaquatabad, Nazimabad and Gulshar areas, the residents of the localities are being advised through microphone to take preventive measures including cleanliness, etc. In Liaquatabad and Aliabad (Karimabad) voluntary agencies put up eye camps last evening to provide medicine and advice to the patients.

PHS: 5400/4003

EYE DISEASE SPREADING FAST IN CITY

Karachi DAWN in English 16 Jun 81 p 7

[Text] The eye epidemic has shown no sign of abating yet and is spreading fast, resulting in the loss of work in the factories, offices, etc.

Many college students suffering from the eye diseases could not appear at the examination centres yesterday.

The Sind Health Secretary, Brig. (Retd) Nahboob Sadiq, has admitted the 'gravity of the situation.' He has sent an SOS to the National Institute of Health to dispatch a team of experts to Karachi to investigate the cause of the eye disease which is yet to be established.

The experts' team from the National Institute of Health, Islamabad, is expected to arrive in the city in a day or two.

The Provincial Health Secretary said that special arrangements have been made in the government hospitals and dispensaries to treat the people. He added that there was enough stock of medicine available at all the health centres to meet the emergency.

PPI adds: The Sind Health Department has declared that the virus conjunctivitis has spread in the city in epidemic form.

According to the health department sources the eye diseases has caused eye sore to hundreds of people in the city.

The specialists say the eye disease, which was on decline three days back, has again erupted which needs special arrangements like mobile eye services in various city areas.

The experts believe that the virus has spread either due to water pollution or dust.

They also pointed out that in the past Karachi was hit by this disease twice, once in 1968 and then in 1975.

Dr Javed Alam, a leading eye specialist and Medical Superintendent Abbasi Shahood Hospital said that so far no case of blindness has been reported due to this disease.

He said the eye is very delicate organ and carelessness can lead to complications. However there was no cause of concern due to this disease.

AFP adds: A three-day free eye camp will be held at Drigh Colony from June 17 to June 19 to deal with the eye disease epidemic it was announced yesterday.

CSO: 3400/4603

POLIO-VACCINE PROCESSING LABORATORY OPENED

Karachi DAWN in English 7 Jun 81 p 7

[Editorial: "Vaccine Production"]

[Text] The opening of a polio-vaccine processing laboratory at the National Institute of Health (Islamabad) not only fills a long-felt gap in the country's health delivery system but marks the beginning, however modest, of an effort to achieve self-reliance in this vital field. As the Federal Health Minister observed while inaugurating the project—started with Canadian assistance—, this should provide a basis for the future development and acquisition of modern technology for the production of viral vaccines in Pakistan. Laboratories of this nature are an indispensable part of an expanded immunisation programme calculated to protect children from half a dozen deadly health hazards. If the target of vaccinating every child in the country by 1990 is to be met, a network of such production units will have to be set up. The progress on establishment of an anti-measles vaccine plant in Peshawar with the help of UNICEF is also an encouraging step. But the antidote for the no less fatal and devastating child-killers like tetanus, tuberculosis and diphtheria will also have to be manufactured at home in ample quantities.

Apart from the fact that the critical shortage and non-availability of essential vaccines tends to cause much anxiety, the inadequate arrangements for their storage and distribution are also a matter of concern. The vaccines received from abroad are temperature-sensitive and have to be distributed in the field in a 'cold chain system'. It is imperative that their quality in use is monitored at different stages. A highly-trained handling apparatus is, therefore, required to secure the vaccines' contents and efficacy. The National Institute of Health which is now charged with the responsibility for producing vaccines and sera for prophylactic and therapeutic use as also for the acquisition of capability to meet domestic and foreign demands must address itself to the assigned task with promptitude.

International agencies like WHO and UNICEF have been more than willing to lend a helping hand by providing the expertise for production as well as finished products. But lack of funds and, to some extent, lack of appreciation of some of the problems peculiar to certain regions have at times tended to limit this role. According to recent reports, prospects for the development of a leprosy vaccine might be jeopardised for want of enough allocations by the World Health Organisation towards special tropical research work. Similarly, the promise of a vaccine against malaria could be pressed more seriously by the less developed countries most adversely affected. It is necessary that the Third World should collaborate to achieve a breakthrough on the vaccine front and attain self-sufficiency through a cooperative endeavour on a regional and zonal basis.

BRIEFS

EYE DISEASE EPIDEMIC--The outbreak of an eye disease in an epidemic form has been reported from various parts of the city. Mr Abdus Sattar Edhi of Edhi, Charitable Trust, told APP that 800 cases had been reported to the trust hospital from Lyari, Baldia, Nayabad, Mithadar, Kharadar, and Jodia Bazar areas. He said that the symptom of the disease that eyes got red and the victims also suffered from fever.--APP. [Text] [Karachi MORNING NEWS in English 3 Jun 81 p 5]

CSO: 5400

BRIEFS

PNEUMONIA EPIDEMIC--Lisbon, May 27--An epidemic of atypical pneumonia has reached the Portuguese capital after leaving 15 dead in Spain and hundreds of Spaniards sick in hospital, mostly children. One person was under observation in hospital here today. After a dozen children were hospitalised on Monday in the northeast Portuguese region of Braganca, bordering Spain. The unusual strain of pneumonia affects mainly children and teenagers, and gives severe headaches, high temperature, aching pains and red blotches all over the body. AFP [Text] [Kathmandu THE MOTHERLAND in English 28 May 81 p 1]

CSO: 5400

BRIEFS

MORE CHOLERA CASES--Trincomalee--Ten persons admitted to the Trincomalee Base Hospital are suspected to be suffering from cholera. Three persons are found to be positive cases after medical examination. Meanwhile, the Health authorities have discovered that the woman who died on Friday was a resident of Kandy and she had come to Trincomalee three days before from Kandy. Now messages have been sent to Kandy Health authorities for further particulars in this regard. On Sunday, Health authorities were busy in collecting more information about the new positive cases of cholera and imposing strict preventive measures in areas where the positive cases were living. Health authorities are making sudden checks on eating houses and wayside boutiques which sell exposed food items and cool drinks. A top-level conference is expected to be held to review the cholera situation in Trincomalee by the Health authorities as more positive cases have been detected after a break of a week. The death toll due to cholera in May has risen to six. The Trincomalee Urban Council at its monthly meeting held last week, decided to request the health authorities to ensure that an ample stock of medicine to control cholera is kept at the hospital and that additional staff should be posted to the cholera ward. UNP Councillor T. Manicka vasagar moved this resolution on behalf of the UNP ground leader, Attorney O. L. M. Ismail who gave notice of this motion. [Text] [Colombo SUN in English 3 Jun 81 p 2] Three more cases of cholera were reported yesterday, from Trincomalee and Anuradhapura. This brings the total for the first five months of the year, to 361 with 36 deaths--ten per cent of the total number of cases. Health Ministry officials yesterday remained tight-lipped about cholera figures. An official said that continued publication of these reports were causing embarrassment and hence no details would be made known. [Colombo SUN in English 5 May 81 p 1]

CSO: 5400

BRIEFS

INSECTICIDE TO COMBAT MALARIA--Khartoum, 1 Jun (SUNA)--A new insecticide for the combat of malaria would be applied in the Gezira Province. The insecticide is known as Fenierithion. Another drug known as Draziquantel is to be applied for the treatment of bilharzia. These two drugs have been adopted by the Blue Nile Health Project authorities. Some \$1,800,000 has been allocated from the Japanese aid to the project for the combat of malaria in the Gezira Province. The project authorities are currently conducting epidemic, medical, biological, engineering and social surveys at Abu Ushar area. These surveys would cover some 50,000 citizens and would be completed within one year from now. [Khartoum SUNA DAILY BULLETIN in English 1 Jun 81 p 1]

DECLINE IN MENINGITIS CASES--The cases of meningitis infections among the citizens had declined during last month to 82 compared to 657 cases during May last year, declared a competent source at the Health Ministry here. [Khartoum SUNA DAILY BULLETIN in English 4 Jun 81 p 15]

CSO: 5400/4741

BRIEFS

POLIOMYELITIS DISAPPEARING--Chung Hsing New Village, Nantou--The Provincial Department of Health said recently that poliomyelitis, a virus inflammation of the spinal cord, which had once been prevalent in Taiwan is disappearing finally, after government efforts to wipe it out. It said that although there are still some cases on the island, a few cases of such poliomyelitis has diminished considerably in recent years. It added that this is due to the shots advocated by government health bureaus. The department expressed its hope that parents would take their infants to the centers to have these injections. [Text] [Taipei THE CHINA POST in English 4 Jun 81 p 7]

CSO: 5400/4940

BRIEFS

REDLIGHT ON YELLOW FEVER--London, May 29 (REUTER)--Yellow fever, a deadly disease kept in check for most of this century, is once again becoming a major threat, the British Medical Journal said today. The disease, which attacks the liver, had reappeared because many developing countries have halted costly control measures and largely abandoned mass vaccination, it said. Mosquitoes which carry the urban form of the fever had reinfested regions where it had been eradicated and invaded others where it had not been found before. [Text] [Colombo SUN in English 30 May 81 p 5]

CSO: 5400

MEASLES DEATHS IN KAWAMBWA

Lusaka DAILY MAIL in English 17 Jun 81 p 1

[Text]

OVER one hundred children have died of measles in Kawambwa district, Member of Parliament for the area, Mr Titus Mukupo revealed yesterday.

Mr Mukupo said unless the Ministry of Health sent adequate medicine to curb the deadly disease quickly, more lives would be lost.

Speaking in an interview at the National Assembly the MP said children started dying in January this year.

According to Mr Mukupo, most of these deaths were recorded at Kawambwa, Buyaka and Mushota rural health centres, Kawambwa Tea Estates and in surrounding villages.

Asked whether medical authorities in the area were not aware of the outbreak of the disease, Mr Mukupo said:

"I am very sure that the medical officer at Mbereshi

Hospital knows about it because he visits the Kawambwa rural health centre once a week."

He added that chairman of Rural Development Committee Mr Kapasa Makasa, was informed about the disease in May when he was in the area during the Labour Day celebrations.

"I informed Mr Makasa that the disease had been in the area since January and he promised to report the matter to authorities in Mansa on our behalf. But since then, we have heard nothing from him," the MP complained.

When contacted, Ministry of Health Deputy Director of Medical Services, Dr Lumbwe Chirwele said he had not received any report regarding measles outbreak in the area.

But Mr Makasa could not be reached for a comment.

RABIES FROM SOVIET UNION CAUSES CONCERN IN FINLAND

Helsinki HELSINGIN SANOMAT in Finnish 31 May 81 p 22

[Article by Riitta Anttikoski: "Rabies Lurks Beyond the Border"]

[Text] Precautions are being taken in southeastern Finland against a dangerous disease that threatens us from Karelia. We are protecting ourselves beforehand by inoculating hunting dogs and destroying wild animals.

The week began with mass vaccinations at Myrankyla near Nuijamaa. The vaccination site was the courtyard of the hunting lodge on the shores of Lehoslampi. The receiving station was set up at the stairs to the gable. A table and a bench from the lodge were carried out to the site.

The first to be vaccinated, some 20 animals, dashed down the slope into the courtyard while the vaccinator, veterinarian Ossi Kempainen, laid vaccine packages and vaccination certificates out on the steps.

The animals to be vaccinated immediately began to squabble among themselves. The smaller the animal waiting in line the more peevish the cries it let out.

The first in line, a year-old Finnish hunting dog called Sila, eyed Ossi Kempainen's doings with suspicion. But the wrangling of the others interested it too.

Before Sila could decide which of the two it was more important to follow, Kempainen managed to inject a milliliter of French vaccine into the loose skin about its neck. That will protect Sila for 2 years against rabies or hydrophobia.

By the beginning of next September hunting dogs in the so-called safety zone will be vaccinated.

Twenty municipalities and cities in the provinces of Kymi and Pohjois-Karjala as well as some municipalities at Punkaharju and Tuusula are included in the safety zone.

Veterinary medicine inspector Saara Reinius of the Agriculture and Forestry Ministry's Animal Diseases Bureau called the vaccination that has now begun a precautionary operation. They are trying to create a 30-50-km wide safety zone near the southeastern border to keep rabies from spreading into areas back of the border.

In addition to the vaccination of dogs, round-the-year hunting of the wild animals that spread rabies most of all is being encouraged in the safety zone. Foxes, raccoon dogs, wild minks and badgers are on the list. Furthermore, the protection of wolves will be lifted after the current protection period is over.

Which wild animal density is most effective in preventing the spread of the disease will also be determined. Chief inspector Seppo Mattila of the Agriculture and Forestry Ministry's Fishing and Hunting Department says that a void is of no benefit either.

"If, for example, the foxes of the area are completely destroyed, foxes from the neighboring area would extend their home territory and in that way a void would accelerate the spread of the disease even sooner."

Fatal Bites

Rabies or hydrophobia is a disease of the central nervous system caused by a virus. The Finnish terms raivotauti [disease of madness, rage] and vesikauhu [fear of water, hydrophobia] describe the final stages of the disease: irritability and aggressiveness. At the end swallowing is painful because of cramps and paralysis of the larynx. Even the sight of water brings on convulsions.

The disease is contracted by humans and animals through the bite of a sick animal. It can also be contracted through a sick animal's saliva or drool if it should come into contact with the mucous membranes or other sores.

The germination period is capricious, from a couple of weeks to 3 or 4 months, even a year.

Rabies infection meant almost certain death until 1885 when Pasteur succeeded in developing a method of treatment. At the end of the century infected Finns still went to Paris for treatment until their own Pasteur Institute was founded in Saint Petersburg.

Later, Finns infected with rabies were treated at the Serum Institute in Helsinki and nowadays at Aurora Hospital. Less than 10 people a year are suspected of having been infected abroad due to dog bites, for example.

A person who has been infected with rabies can be saved by vaccinating him as soon as possible during the germination period. Today the method of treatment includes six injections over a period of 3 months.

The last person to have died of rabies in Finland was the painter, Ernst Kriin, who was a member of the October Group. He died in 1934 after being infected by a stray dog who bit him in the hand on the Karelian Isthmus.

Not a single case of rabies has been confirmed in Finland since 1939. Then, as was the case every time before then, the disease entered our country across the southeastern border. We have managed to halt its advance near the border too, except during World War I. At that time dogs belonging to the Czar's troops spread the disease to different parts of the country.

Approaching Threat

The current wave of rabies in Europe began to spread out of the so-called Polish Corridor from the neighborhood of Kaliningrad, the former East Prussian cultural center of Konigsberg, after World War II.

It has been advancing from there to the west, south and east at the rate of 50 km a year. Areas free of rabies in Europe are England, Ireland, Portugal and Malta and, in addition, only Iceland, continental Norway, Sweden and Finland.

Last year about 19,000 cases of rabies were confirmed, a fourth of them among domestic animals and three-fourths among wild animals. Three people died of rabies: one Frenchman and two Yugoslavs.

Inspector of veterinary medicine Saara Reinius feels it likely that the rabies wave will attack Finland too. It is possible that infected animals may cross over on the ice from Estonia during very cold winters. That is how the fox itch arrived a few years ago, but a more likely place for it to cross over is the southeastern border. Every year a few cases are confirmed in Soviet Karelia.

Saara Reinius, however, points out that what is meant by Karelia in Soviet statistics is, nevertheless, a considerably bigger area than what the Finns mean by that designation. The closest case of rabies in that direction was in the Leningrad area 5 years ago.

"But merely a fraction of the cases of animals with rabies living in their natural environment is noticed. Furthermore, raccoon dogs may retain rabies for very long periods of time in certain areas because the disease is concealed for a long time due to the fact that they hibernate in winter," Saara Reinius noted.

Additional Tax on Dogs

Proper disciplining of cats and dogs plays a decisive role in combatting rabies. Dogs, or rather dog owners, have paid and are paying for this. Funds used to compensate owners of animals that die of rabies were originally collected by means of a tax on dogs.

Eino Hyvarinen, chairman of the Nuolijärvi Municipal Council, feels that the 20-mark vaccination fee is an additional tax on dogs in the border area.

He brought Pelle, a year-old gray spitz that will be used to hunt deer for the first time this fall, to be vaccinated.

Eino Hyvarinen was still bothered by the disappearance of his last gray spitz. Maybe it ran across the border by accident and got lost there or a deer happened to kick it.

"It was a good deer-hunting dog. Shortly before it disappeared, I had been offered 1,000 marks for it," Hyvarinen told us.

Inspection by a veterinarian always awaits a dog that has strayed to the other side of the border after its return. If there are no bite wounds on the dog, it gets off with a 2-week quarantine and a subsequent inspection.

"If there are bite wounds on it, it has to be held in quarantine for 4 months at the owner's expense," Ossi Kemppainen explained.

The line of animals in front of him waiting to be vaccinated got shorter at a fairly rapid rate. Many forgot their opposition to the procedure and followed the photographer's camera.

But nothing could ease the fear of Raju, a 4-year-old spitz. It was quivering all over as its turn approached. After all, this was the second time in its life it had ridden in a car and the first time it had been carried tied up with a thin cord.

During the vaccination some of the animals to be vaccinated had a little bit of string tied around their snouts. But no bigger differences of opinion than these arose.

"It seems to be easier to vaccinate a dog in such strange territory than on its home grounds," Ossi Kemppainen said.

As he wrote up the vaccination certificates, he reminded them that the certificate must be carried with them in the forest. It is checked just the same as a hunter's hunting license is. Dogs that have not been vaccinated will be sent home from the hunt.



Safety zone: Hunting dogs of the area are being vaccinated against rabies.

11,466

CSO: 5400/2139

VIETNAM

LIVESTOCK IN HO CHI MINH CITY AREA INOCULATED

Ho Chi Minh City SAIGON GIAI PHONG in Vietnamese 4 Mar 81 p 4

[Article by "M.Y.": "Livestock Throughout the City Inoculated for Cholera and Pasteurellosis"]

[Text] SOGP: Nearly 100 veterinary medicine personnel of the municipal Epidemic-Prevention Unit, cooperating with the veterinary medicine network in the precincts and districts, are giving cholera and pasteurellosis inoculations to hogs, water buffaloes, and cattle in the city.

After two weeks of carrying out that tasks, 11 precincts and districts have essentially completed the inoculation of the local livestock. The veterinary medicine personnel are continuing give inoculations in the remaining places, and intend to complete this year's first inoculation cycle next week.

The Municipal Veterinary Medicine Station has supplied to the various places 250,000 doses of vaccine for hogs and 50,000 doses of vaccine for water buffaloes and cattle, for inoculations during this cycle.

The veterinary medicine personnel go to the pens and stables to give the inoculations, and the people do not have to pay for them.

5616

CSO: 5400/4598

PLANT DISEASES DIAGNOSED BY SPECIAL TEAMS

Kathmandu THE RISING NEPAL in English 28 May 81 p 3

[Text] Chiang Mai, Thailand--The hill farmers of this northern region are Thailand's major garlic producers. Last year, the leaves of their garlic started turning yellow, almost white.

The farmers feared all their crops would be ruined.

When the central Government in Bangkok was alerted, it immediately sent one of its new Plant Protection Teams which specialises in vegetable to investigate the outbreak.

The team members--scientists and extension agents--examined samples of the diseased garlic and discovered that the yellowing of the garlic leaves was caused by an entirely new species of Eriophyid mites.

Mites are microscopic animals which cause, among others, the rusty skin of oranges. This was the first time that mites were recorded to have attacked garlic and the scientists were excited.

The team members theorised that the mites were in the fields all along but a severe drought followed by strong rain must caused the outbreak. [as published]

The scientists prescribed a miticide and the extension agents immediately relayed the information to the hill farmers and taught them how to apply the miticide.

The success of this plant protection team which specialises in vegetables, mirrors the effectiveness of a unique nationwide effort to transfer technology and scientific information to the farmers.

By so doing, Thailand hopes to reduce its crop losses arising from diseases which is estimated at 30 percent of the total agricultural production annually. This will also result in increased production for the country's 4.6 million farm families who till an average of five hectares land.

"The teams are like general practitioners who travel around the country diagnosing diseases," says Yoram Melamed, an agricultural expert working with the Food and Agriculture Organisation (FAO) which funds the teams.

There is a plant protection team for each of Thailand's major crops: rice; maize and sorghum; peanut, soybean and mungbean; fibre crops; root and tuber crops; vegetables; fruits; coffee and tea; sugarcane; coconut, rubber and oil palm.

There is also a team which deals with stored crops, bringing the total to 11 plant protection teams.

These teams are composed of ten members each, scientists and technicians coming from the Department of Agriculture and the Department of Agricultural Extension. To foster closer cooperation, these teams meet once every six months to exchange information and review their programmes.

Backing up these teams are nine regional plant "clinics," actually laboratories staffed with a plant pathologist and an entomologist and equipped with modern facilities. "If the teams cannot immediately diagnose the disease, they can refer to the specialists manning these clinics," said Mr Melamed.

Once the scientists diagnose the disease and prescribe the necessary steps to be taken, the extension agents in the team relay the information to the farmers. "But it is not enough to write the farmer a letter or a bulletin to show him the solution," says Mr Melamed.

Two years ago, downy mildew infested the maize farms of Central Thailand. This serious disease, also called Crazy Top Disease (*Sclerospora* Sp.), could be solved by treating the corn seeds with a fungicide. Seven grams of a newly-formulated fungicide applied on one kilo of maize seeds will do the trick.

The extension agents planted demonstration plots right in the farmer's farms to show the difference between untreated seeds and those that were treated with the fungicide. Most of the farmers were convinced and they easily learned the process of treating their maize seeds with the fungicide.

These teams also teach the farmers how to use pesticides intelligently and thus, reducing environmental damage. Whenever possible, they would advocate the use of natural control agents and ensure greater safety for the farmers and their animals.

The teams also participate in the training and development of extension agents for the country's first foray into agricultural extension which they started only in 1977. This has been described as a "revolution" for Thailand's agriculture. (DNS)

CSO: 5400

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July 7, 1981